

**MANAGEMENT IMPROVEMENT**  
Streamlining Fiscal Document Approval Process  
**IMPACT**

#33 (SENT)

- Quality Enhancement
- Automated approval of DCMH client service billings
- Increased Customer Satisfaction
- Reduced processing time by 50 percent

**THE ISSUES**

- Inability to turn around payments to DCMH contracted direct service providers quickly due to delays in delivery of vendor invoices to Fiscal Services
- Payment delays to vendors generating complaints regarding their cash flow
- Internal cost reports not produced in a timely manner resulting in late information for management purposes

**THE GOAL**

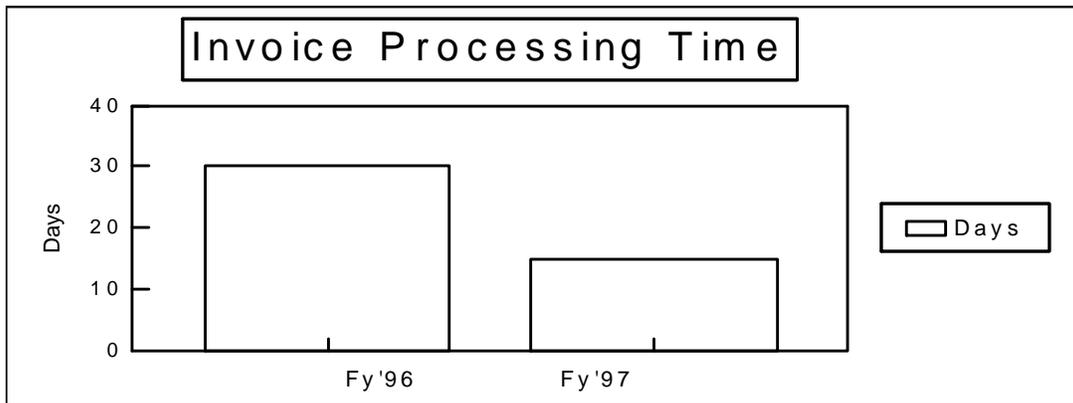
- Provide predictable, timely payment delivery to DCMH contracted care providers
- Provide accurate payment information and timely management information to the Department
- Provide better customer service to both care providers and staff

**THE INTERVENTION**

- FACTS programmed to receive client service authorization information
- Care provider invoice flow redesigned to direct receipt of invoices to DCMH data unit first (vs. contract manager) then sent directly to Fiscal Services
- Payment voucher signature process simplified
- Client/care provider cost information available in a timely manner and cost recovery processes are more efficient

**THE RESULTS**

- Care providers receive payments on an average of 15 days compared to 30 days
- Cost recovery cycle times are decreased
- Management reports contain more timely information on a regular basis



**Narrative Summary**

In the past, DCMH contracted care providers complained about payments not being received in a timely manner. As a solution, the Division of Management Services Fiscal Unit in partnership with the Division of Child Mental Health redesigned the contract care provider payment process as a part of the FACTS project to create an automated cross-check vs. The previous manual check of invoices against a service census. By redesigning the care provider invoice flow, redundant reviews of invoices by data entry and contract managers was eliminated. Previously, payment vouchers were signed by Fiscal Services staff and contract managers. Since FACTS now automatically cross checks for approved client services, the contract manager signature step was eliminated, reducing elapsed payment processing time by 50 percent. In addition, client/care provider information is available in a timely manner and the department's cost recovery process is more efficient.